

DEPARTMENT OF PUBLIC SAFETY



LIQUOR LICENSING AND INSPECTION UNIT
164 STATE HOUSE STATION
AUGUSTA, ME 04333

Tel: (207) 624-7220 Fax: (207) 287-3424

APPLICATION FOR LIQUOR SALESMAN

YEAR ENDING DECEMBER 31, _____

\$50.00 Check Payable: Treasurer State of Maine

NEW: _____ (If new, please include a letter from your company confirming that you are authorized to represent them in this state.)

RENEWAL: _____

NAME: _____

ADDRESS: _____

STATE: _____ ZIP CODE: _____ FAX NUMBER: _____

TELEPHONE-HOME: _____ WORK: _____

DATE OF BIRTH: _____ PLACE OF BIRTH: _____

Name and address of all firms or corporations by whom you are employed as a liquor salesman:

Have you, in the past 5 years, been arrested, indicted, or convicted of any violation of law, other than a minor traffic violation of any State or of the United States Government?

YES: _____ NO: _____ (If yes, please give details):

Signature

Date

